

SUBCONTRACTOR'S WORK AUTHORIZATION CERTIFICATION

Pursuant to O.C.G.A. § 13-10-91, all qualifying contractors and sub-contractors performing work within the State of Georgia on a contract with a public employer must register and participate in a federal work authorization program. Sub-contractors may participate in any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 ("IRCA").

The date by which your company must register and participate in a federal work authorization program depends on the number of employees in your company. If your company has 500 or more employees, you are required to register and participate in a federal work authorization program by July 1, 2007. If your company has 100 or more employees, you are required to register and participate in a federal work authorization program by July 1, 2008. If your company has 99 employees or fewer, you are required to register and participate in a federal work authorization program by July 1, 2009.

Certify compliance with O.C.G.A. § 13-10-91 by checking the appropriate line below:

The undersigned has registered for and is participating in a qualifying federal work authorization program; *or*,

The undersigned is not required to register for or participate in a qualifying federal work authorization program at this time. But, if the undersigned becomes a qualifying sub-contractor in the future, the undersigned agrees to immediately:

- (1) Notify the covered prime contractor; *and*,
- (2) Register for and participate in a qualifying federal work authorization program.

BY: Authorized Officer or Agent

Date

Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN

Printed Name

BEFORE ME ON THIS THE
_____ DAY OF _____, 20__.

Basic Pilot User Identification Number
(if applicable)

Notary Public
My Commission Expires: _____